

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)		I. EPA I.D. NUMBER CTD003935905	
II. EPA I.D. NUMBER		PLEASE PLACE LABEL IN THIS SPACE		GENERAL INSTRUCTIONS	
III. FACILITY NAME				If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
IV. FACILITY MAILING ADDRESS					
VI. FACILITY LOCATION					

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	PRATT & WHITNEY AIRCRAFT GROUP MD&CPD
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IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2	WICKWIRE JAMES D PLANT ENGR	203	565 4887

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	
3	400 MAIN STREET

B. CITY OR TOWN		C. STATE	D. ZIP CODE
4	EAST HARTFORD	CT	06108

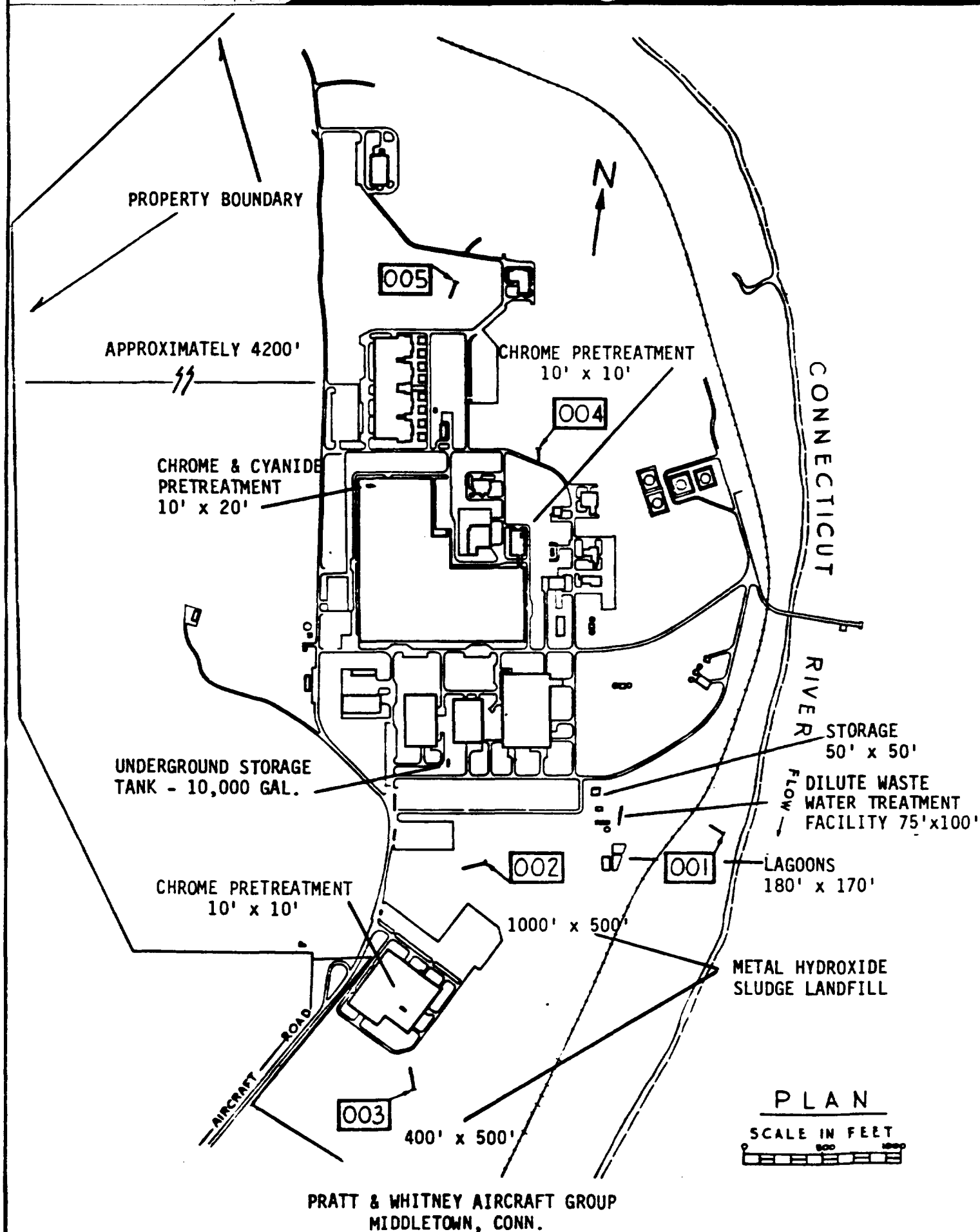
VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER		B. COUNTY NAME		C. CITY OR TOWN		D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
5	AIRCRAFT ROAD	MIDDLESEX	MIDDLETOWN	CT	06457			

RCRA RECORDS CENTER
FACILITY Pratt & Whitney
FILE NO. CTD990672081
FILE LOC. R. 1A
OTHER RDMS #2498

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY												
W C T D 0 0 3 9 3 5 9 0 5													W DUP												
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																					
				1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))													
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
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16	D 0 0 0	20,000	T	T 0 1																					
17	P 0 3 0																								
18	D 0 0 0	900,000	T	T 0 1																					
19	D 0 0 6																								
20	D 0 0 7																								
21	F 0 0 6	230	T	S 0 4																					
22	F 0 0 6	9,000	T	D 8 0																					
23																									
24																									
25																									
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V. FACILITY DRAWING (see page 1)



PRAIT & WHITNEY AIRCRAFT GROUP EPA#CTD003935905
FORM I ATTACHMENT I

X EXISTING ENVIRONMENTAL PERMITS (Cont.d)

E. OTHER

1) CT. 083-I/HW-1 STATE SOLID WASTE PERMIT

2) P104 0024 STATE AIR EMISSION PERMIT


3) P104 005 " " " "

4) P104 0011 " " " "

$$2/14/77$$

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STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



PLEASE PRINT OR TYPE (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CTD001449511		Manifest Document No. 0063176		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State law		
3. GENERATOR'S Name and Mailing Address PRATT & WHITNEY MFG DIV. 415 WASHINGTON AVE. NORTH HAVEN, CT. 06473						A. State Manifest Document Number CT B 0063176				
4. GENERATOR'S Phone (203) 234-4231						B. State Gen. ID SAME				
5. TRANSPORTER 1 Company Name Hitchcock Gas Engine Co.						C. State Tran. ID G14389				
6. US EPA ID Number CTD002593887						D. Tran. Phone (203) 334-4812				
7. TRANSPORTER 2 Company Name						E. State Tran. ID				
8. US EPA ID Number						F. Tran. Phone ()				
9. DESIGNATED FACILITY Name and Site Address Hitchcock Gas Engine Co. 50 Cross St. Bridgeport, Conn. 06610						G. State Facility's ID Same				
10. US EPA ID Number CTD002593887						H. Facility's Phone (203) 334-4812				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Hazardous Waste Liquid, N.O.S. ORM-E NA9189						12. Containers No.	Type	13. Total Quantity	14. Unit Vol/Vol	I. Waste No.
J. Additional Descriptions for Materials Listed Above Waste oil contaminated with Halogenated Organics						K. Handling Codes for Wastes Listed Above a 502 c b TO1 d				
15. SPECIAL HANDLING Instructions and Additional Information Oil - No Flares, Smoking or Flames in Hazard Area Dike ahead of Spill, Take up with Sand or other Non Combustible absorbent material.										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable State laws and regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.										
Printed/Typed Name P+W by John Cherniak						Signature John Cherniak		Date Month Day Year 12/12/86		
17. TRANSPORTER 1 Acknowledgement of Receipt of Materials										
Printed/Typed Name JOSEPH PEARBODY						Signature Joseph Pearbody		Date Month Day Year 12/12/86		
18. TRANSPORTER 2 Acknowledgement of Receipt of Materials										
Printed/Typed Name						Signature		Date Month Day Year		
19. DISCREPANCY Indicate Discrepancy										
20. FACILITY OWNER OR OPERATOR Acknowledgement of Receipt of hazardous materials received by this manifest except as noted in item 19										
Printed/Typed Name James Stanley						Signature James Stanley		Date Month Day Year 12/12		

COPY 1: DESTINATION STATE - Mailed by TSDF

CT B 0063176